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CONFIRMATION NO. 4229

SERIAL NUMBER 10/510,085	FILING OR 371(c) DATE 04/11/2005 RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. 30815/26239
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APPLICANTS

Hans-Dieter Wiek, Hochdorf, GERMANY;
 Bernd Gugel, Ulm-Einsingen, GERMANY;

**** CONTINUING DATA *******

This application is a 371 of PCT/EP03/01634 02/18/2003

**** FOREIGN APPLICATIONS *******

GERMANY 20205274.5 04/05/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 4	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 5	
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

4743

TITLE

Medical, handpiece in particular for dentistry, with an outlet for an abrasive flowing medium and splashguard for the outlet

FILING FEE RECEIVED 1364	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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